

MAR 15 2016

REVISED DATE: 09/2001

JULIE RICHARDS JOHNSTON, CLERK
US DISTRICT COURT, EDNC
BY [Signature] DEP CLK

FORM TO BE USED BY A STATE PRISONER IN FILING A COMPLAINT UNDER THE CIVIL RIGHTS ACT, 42 U.S.C. SECTION 1983 OR BY A FEDERAL PRISONER IN FILING A BIVENS CLAIM.

UNITED STATES DISTRICT COURT
EASTERN DISTRICT OF NORTH CAROLINA
WESTERN DIVISION

NO. _____
(leave this space blank)

DWIGHT L. ROBINSON

(enter full names of each plaintiff(s))

Inmate Number 0347829

MR. HESS, SUPERVISOR,

MR. JEFF LASSITER, MANAGEMENT,

MR. GEORGE T. SOLOMON, DIRECTOR OF D.P.S.

(enter full names of each defendant(s))

I. HAVE YOU BEGUN OTHER LAWSUITS IN FEDERAL COURT DEALING WITH THE SAME FACTS INVOLVED IN THIS ACTION? YES () NO (☒)

If your answer is YES, describe the former lawsuit in the space provided below:

II. DID YOU PRESENT THE FACTS RELATING TO YOUR COMPLAINT TO THE STATE INMATE GRIEVANCE PROCEDURE? YES (☒) NO ()

If your answer is YES:

1. What steps did you take? I INFORMED SUPERVISOR OF MY COMPLAINT,

2. What was the result? (Attach copies of grievances or other supporting documentation.)

"SEE GRIEVANCES ATTACH SHEETS"

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VERIFIED STATEMENT

I have been advised of the requirements regarding exhaustion of administrative remedies and now submit this verified statement.

(Please choose the box that applies to your action):

 There are no grievance procedures at the correctional facility at which I am being confined.

 This cause of action arose at CALEDONIA ENTERPRISE, and I am now being housed at CALEDONIA PRISON. Therefore, I do not believe I have administrative remedies relating to this complaint at this time.

YES I have exhausted my administrative remedies relating to this complaint and have attached copies of grievances demonstrating completions.

III. PARTIES:

In Item "A" below, place your name in the first blank and your present address in the second blank. Do the same for additional plaintiffs, if any. NOTE: ALL PLAINTIFFS LISTED IN THE CAPTION ON THE FIRST PAGE SHOULD BE LISTED IN THIS SECTION.

A. Name of Plaintiff: DWIGHT L. ROBINSON #0347829
 Name of Present Confinement CALEDONIA CORRECTIONAL INST.
 Address of Present Confinement P.O. Box 137, TILLERY N.C. 27887

In Item "B" below, place the full name of defendant in the first blank, his official position in the second blank, and his place of employment in the third blank. Use Item (C) through (F) for additional defendants. NOTE: ALL DEFENDANTS LISTED IN THE CAPTION ON THE FIRST PAGE SHOULD BE LISTED IN THIS SECTION.

B. Defendant MR. HESS
 Position SUPERVISOR
 Employed at DOS, CALEDONIA ENTERPRISE
 Address P.O. Box 137, TILLERY, N.C. 27887
 Capacity in which being sued: Individual () Official () Both (X)

C. Defendant MR. JEFF LASSITER
 Position MANAGEMENT DIRECTOR OF CANNERY
 Employed at DOS, CALEDONIA ENTERPRISE
 Address P.O. Box 137, TILLERY, N.C. 27887
 Capacity in which being sued: Individual () Official () Both (X)

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- D. Defendant MR. GEORGE T. SOLOMON
 Position DIRECTOR OF DEPARTMENT OF SAFETY CORRECTIONAL
 Employed at DOS D.P.S.
 Address 2787 CALEDONIA DRIVE, TILLERY, NC. 27887
 Capacity in which being sued: Individual () Official () Both (☒)
- E. Defendant _____
 Position _____
 Employed at _____
 Address _____
 Capacity in which being sued: Individual () Official () Both ()
- F. Defendant _____
 Position _____
 Employed at _____
 Address _____
 Capacity in which being sued: Individual () Official () Both ()

IV. STATEMENT OF CLAIM

State here as briefly as possible the FACTS of your case. Describe how each defendant is involved. Include also the names of the other persons involved, dates and places. **DO NOT GIVE ANY LEGAL CITATIONS OR ANY LEGAL ARGUMENTS OR CITE ANY STATUTES.** If you wish to allege a number of related claims, number and set forth each claim in a separate paragraph. Use as much space as you need. Attach extra sheets if necessary.

I AM A CANNERY WORKER, WHO IS FORCED TO WORK IN A DANGEROUS AREA'S WHERE PAINT & ABESTOS EXIST. I WAS NEVER ONCE TOLD BY STAFF OR EMPLOYER'S OF DOS ABOUT THE HAZARD OF MY JOB, AND HERE RECENTLY I AND MY CO-WORKER WAS FORCE TO TAKE A BREAK TO REMOVE FALLING PIECES OF PAINT WITH ABESTOS LEAKING FROM SAID CEILING. I'VE HERE LATELY HAD NOSE CONTINUITY RUNNING BLOWING BLOOD OUT, SHORTNESS OF BREATH AND A HURTING IN MY CHEST. OUT OF ALL CANNERY WORKERS, I'M CLOSEST TO THE ROOF TOP FOR THEY PUT ME UP STAIRS WHERE I AM TO THROW CAN'S THROUGH THE HOLE TO BE FILLED WITH VEGETABLES. WE HAVE STAY UP STAIRS BREATHING SUCH,

ATTACH SHEETS OF STATEMENT OF CLAIM

B, WITH NO EQUIPMENT TO HELP US, WE HAVE TO SIGN UP PAPER'S EACH YEAR TO COVER THE ENTERPRISE. MY HEALTH IS IMPORTANT AND LIKE I SAID THE OTHER DAY I WAS FORCED TO KNOT DOWN LOSE PIECES, SO THAT THE CONTRACT'S ROOF MEN CAN COME IN TO SPREAD FORM ON THE ROOF, WE HAVE BEEN FORCED TO WORK IN DANGEROUS AREA'S FOR SOME TIME NOW, I'VE BEEN THERE OVER A YEAR, THERE IS NO EXCUSE IN THIS WORLD TO SAY TO THE INMATE'S, 'QUOT, I'LL HAVE ALL OF YOU SHIPED OUT AND MORE BROUGHT IN' IF THE CANNERY REALLY WAS GOOD FOR THE PROCESS OF REHABILITATION THEN WHY SUCH STATEMENT MADE BY THE MANAGEMENT OF SAID ENTERPRISE OR WHY MAKE INMATE'S WORK IN SUCH AREA'S, THEY'RE FIXING THE PROBLEM AND SO THAT NO ONE'S EVER LEARN OF THE TRUTH, THEY'VE BROUGHT IN CONTRACTOR'S TO DO THE JOB, SO WHAT HAPPENS TO MY HEALTH AS TIME GOSE BY? I ASK THE HONORABLE COURT TO LOOK INTO ALL FACTS OF THIS CASE AND THEY WILL SEE MY FACTS ARE TRUE, I MAKE THIS BRIEF AS SHORT AS POSSIBLE FOR THIS HONORABLE COURT, AND FOR JUSTICE, COMPLAINT: I DWIGHT L. ROBINSON, BRING THIS COMPLAINT FOR THE FOLLOWING REASON, FIRST AND UTMOST IS MY HEALTH AND MY WELFARE, AND SECONDLY THE PRINCIPLES OF FACTS CONCERNING, THE CONFIRMED ABESTOS WHICH EXIST DOWN AT THE CANNERY, I HAVE BEEN FORCED TO WORK IN DANGEROUS AREA'S OF THE PLANT CLOSER THEN MOST MEN, BY BEING PUT UP STAIRS WHERE THE DUST PARTICLES ALWAYS FLOWN IN THE AIR, I WAS TOLD BY SUPERVISORS I SIGNED PAPER'S STATING I WANT TO WORK IN THE CANNERY, BUT NO WERE THERE ANY WARNING ON DOCUMENTATION SAYING I FOR FIT MY HEALTH & WELFARE, NOR WAS I EVER TOLD OF SUCH MATERIAL EXISTED, I HAPPEN TO FIND A SIGN ON THE POSTED ON A DOORWAY, MY THEORY "SEVERAL MEN FOR WHICH I KNOW HAVE DIED FROM CANCER, ALTHOUGH I CANN'T CONNECT THOSE MEN TO SUCH, IT IS FACTS I RELY ON TO BRING FORTH THIS ACTION, FIRST AND UTMOST I WAS PLACED IN THIS AREA BY A SUPERVISOR, FOR IF I HAD FAILED I WOULD BE HELD ACCOUNTABLE BY MY ACTION'S, NEVER THE LESS I FULFILLED MY PLEDGE TO FOLLOW ALL RULES SET FORTH BY MY SUPERVISION, ON OUR LAST DAYS BEFOR CHRISTMAS HOLIDAY, I WAS TOLD BY SUPERVISOR MR. HESS TO TAKE A BROOM AND KNOT DOWN ANY LOOSE PARTS FROM SCAFFOLDING, AND AT FIRST I REFUSED, BUT FOLLOWED ORDER'S, AS SET FORTH IN SAID

"Attach sheets of statement of claim,"

C RULE AND REGULATIONS, EVER SINCE, I HAVE BLOODY NOSE'S, MY BREATHING HAS SHORTNESS AND MY CHEST HAS BEEN HURTING LATELY. IT IS MY BELIEF THAT SAID ABESTOS HAS LEAKING FOR YEARS THROUGH WATER SOME TIME COME DOWN ON CAN'S AND I HAVE NOTICED THE DUST WHICH SETTLE'S ON CAN'S BEFORE I THROW THEM THROUGH THE HOLE TO BE FILLED WITH VEGETABLE. THIS PLANT HAS BEEN A DANGER TO MYSELF AND OTHER FOR YEARS, AND THIS MATTER SEEMS TO NOT BOTHER THOSE THAT RUN IT, THE SIGN ON THE DOOR ~~PO~~ POST SAY'S, CONFIRMED ABESTOS CONTAINED MATERIAL ARE LOCATED WITHIN THIS FACILITY. DO NOT DISTURB WITHOUT PROPER TRAINING AND EQUIPMENT. BUT THE SIGN THAT'S POSTED ON THE WALL OUTSIDE OF THE CANNERY, DO NOT IMPLY OR INDICATE WHERE THE ABESTOS ARE HIDDEN IN THE FACILITY. WE INMATES HAVE NO IDEA, NOR HAS THE STAFF OR EMPLOYER'S, AND SUPERVISOR'S, MR. JEFF LASSITER, MANAGEMENT HAS ATTEMPT TO GIVE INMATES A WARNING OF THE DANGER & CAUTION SIGN WERE EXACTLY, OR OVER STATED THE IMPORTANCE OF THE INTOXI BEEN IMPLICATED CONCERNING DIRECTLY WHERE THE ABESTOS ARE LOCATED, NOW I HAVE BEEN WORKING WITHOUT ANY EQUIPMENT AND MY HEALTH IS FAILING BECAUSE OF SUCH, ON DEC 16, 2015 THAT THURSDAY, I STARTED COUGHING REAL BAD, SNIFFLE'S NOSE CONTINUAL RUNNING. THE COUGHING GOT MY CHEST HURTING. I HAD TO STAY IN BED FRIDAY THE 17TH + SATURDAY 18TH BE CAUSE I WAS HURTING AND FEELING SO BAD. ON DEC 25, 2015 I WAS WRITING A LETTER AND MY NOSE JUST START BLEEDING AND WHEN I BLOW MY NOSE TRACE OF BLOOD SHOWN AND COMING OUT. LATELY SOME TIME IT HURT FOR ME TO INHALE AND BREATH. I'M REQUESTING AN X-RAY OR WHAT OTHER MEDICAL TREATMENT NEEDED. ABESTOS - ANY OF SEVERAL MINERALS (ASCHRYSOTILE) THAT READILY SEPARATE INTO LONG FIBER'S THAT CAUSE 'ABESTOSIS' AND HAVE BEEN IMPLICATED AS CAUSE'S OF CERTAIN 'CANCERS', AN THAT HAVE BEEN USED ESPECIALLY FORMERLY AS FIREPROOF INSULATION MATERIALS ABESTOSIS - PNEUMOCONOSIS, BUT ABESTOSIS PARTS THAT IS MARKED BY THICKING AND SCRRING OF LUNG TISSUE'S,

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D. PNEUMONOSIS, A DISEASE OF THE LUNGS CAUSE BY HABITUAL INHALATION OF IRRITANTS (AS MINERAL OR METALLIC PARTICLES, BLACK LUNG / SILICOSE), MESOTHELIOMA, A MALIGNANT TUMOR LINING OF LUNGS. THE ABOVE IS ALL MY REASON FOR SUCH WORRY'S AS TO MY HEALTH AND BEEN FORCED TO WORK IN DANGEROUS AREAS SUCH AS I HAVE, AND KNOWING THE PAINT FLAKES AND DUST CONTAINS ABESTOS. PETITIONER BRING FORTH THIS ACTION AGAINST THE DOS, AND THE CANNERY ENTERPRISE PEOPLE IN POWER, WHOM TOOK MY HEALTH FROM ME. TO: THE HONORABLE COURT, PLEASE ACKNOWLEDGE ABOVE, PETITIONER HAD FILED THIS GRIEVANCE, ON DEC 14, 2015, NOW PETITIONER WAITING TO EXHAUST ADMINISTRATIVE REMEDIES, AS OF JAN 5, 2016, PETITIONER WAS FORCED TO SIGN THE 2016 ORIENTATION FORM. DURING PROCESS OF SIGNING THE ORIENTATION FORMS, I ACKNOWLEDGE THAT THE CANNERY HAD MADE SUDDEN ADJUSTMENT PERTAINING TO THE CORRECTION OF ABESTOS BEING REMOVED BY SPRAYING INSULATION TO COVER UP THE ABESTOSIS THAT STILL REMAINS ^{IN} THE FACILITY, WHY NOW CAUSE PETITIONER HAD FILE A GRIEVANCE ON DEC 14, 2015, SURELY PETITIONER HAVE THEIR ATTENTION NOW, WHY MAKE THE INMATE'S SIGN PAPER NOW. THE DAMAGE HAS ALREADY BEEN DONE, AFTER BEING FORCED TO SIGN. MY UNDERSTANDING IS THAT, IF I FAIL TO SIGN THE DOCUMENT THEY WOULD WRITE ME UP FOR REFUSING A DIRECT ORDER AND MAY GET CHARGED AND LOCK UP.

V. RELIEF SOUGHT BY PRISONER

State briefly exactly what you want the Court to do for you. MAKE NO LEGAL ARGUMENTS. DO NOT CITE CASES OR STATUTES.

I WANT THE FULL ^{MAX} ON PUNITIVE DAMAGES AND ON PHYSICAL PAIN'S AND MISERY. THE FULL CAP ALLOWED BY LAW. I WANT MENTAL PAYMENT FOR MENTAL STRESS-STRESS AS WELL.

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Signed this 14 day of MARCH, 2016.

Dwight L. Robinson
 Signature of Plaintiff

 Signature of other Plaintiffs
 (if necessary)

I declare under penalty of perjury that the foregoing is true and correct.

3-14-2016
 Date

Dwight L. Robinson
 Signature of Plaintiff

 Signature of other Plaintiffs
 (if necessary)